JAN-12-2005 16:06

HAHN LOESER + PARKS

3308647986 P.01

FAX TRANSMISSION

Hahn Loeser • Parks

RECEIVED
CENTRAL FAX CENTER

Twin Oaks Estate One GoJo Plaza, Suite 300 Akron, Ohio 44311-1076 www.hahnlaw.com

JAN 1 2 2005

Telephone: 330.864.5550 Facsimile: 330.864.7986

Cleveland ▲ Columbus ▲ Akron

FROM:	W. Edward Crooks, Esq.	Number of Pages: (including this pages)	2
DATE:	1/12/2005	Client Code:	200002.00003
SUBJECT:	Change of Correspondence	SEND BY:	Cheryl Martin
то:		Facsimile Number:	Confirmation Number:
United States Patent and Trademark Office		1703-872-9306	330-864-7986

SENDER'S COMMENTS:

		•	•	
This will be the only form of delivery of	f transmit	tted documents.	⊠	
This transmission will also be sent by:	□ Mail	☐ Messenger	☐ Overnight Delivery	

The information contained in this facsimile message is attorney privileged and confidential information intended only for the use of the recipient named above. If you are not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this document or its contents is strictly prohibited. If you have received this document in error, please immediately notify us by telephone (you may call us collect at 216.621.0150 ext. 2272), and return the original facsimile to us at the above address via the U.S. Postal Service. Thank you.

Akron - 81466.1

PTO/SB/122 (09-04)
Approved for use through 07/31/2006, OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

CHANGE OF CORRESPONDENCE ADDRESS **Application**

Under the Paperwork Reduction Act of 1995, no persons are required to	o respond to a collection of information	on unless it displays a valid OMB control number.
CHANGE OF CORRESPONDENCE ADDRESS Application	Application Number	10/808,997
	Filing Date	03/25/2004
	First Named Inventor	Katherine Mecsics
Address to:	Art Unit	3765
Commissioner for Patents P.O. Box 1450	Examiner Name	Unknown
Alexandria, VA 22313-1450	Attorney Docket Number	200002:00003

I St	تحملهم الممكلات مادارين	t sentingtion to:		
Please change the Correspondence Address for the about	ve-identifiled patent	application to.		
Customer Number:	021324			
OR				
Firm or Individual Name				
Address		;		
City	State	Zip		
Country		· · · · · · · · · · · · · · · · · · ·		
Telephone	Fax			
This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data: Change" (PTO/SB/124). I am the: Applicant/Inventor Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). X Attorney or agent of record. Registration Number 51124 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number Signature				
Typed or Printed				
Name W. Edward CROOKS	Telephone	N 044 5550		
Date January 12, 2005 NOTE: Signatures of all the inventors or assignees of record of the entire interes		0) 864-5550 ; (s) are required. Submit multiple		
forms if more than one signature is required, see below. X Total of1 forms are submitted.				

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.